# IDAHO TELEHEALTH COUNCIL

## March 13, 2015

# **Meeting Minutes**

## ATTENDEES: LOCATION: 450 W State Street, 10<sup>th</sup> Floor, Boise, ID

## **Members Present:**

Stacey Carson - Telehealth Council Chairman, Idaho Hospital Association

Susan Ault, Idaho Primary Care Association

Marc Chasin, St. Luke's Health System

Tana Cory, Bureau of Occupational Licenses

Becky diVittorio, OptumHealth

Kathy McGill, Department of Insurance

Nancy Kerr, Idaho Board of Medicine

Linda Mac Vicar, Pacific Source

Casey Meza, Affiliated Health Services, Kootenai Health

Michael Meza, Kootenai Health

David Morledge, Neurostatus, LLC

Tracey Sessions, Idaho State Hospital South

Mary Sheridan, Department of Health and Welfare, Division of Public Health

Matt Wimmer, Department of Health and Welfare, Division of Medicaid

#### Teleconference:

Michael Bess, OptumHealth

Melissa Christian, Regence BlueShield

Rick Goodwin, Eastern Idaho Regional Medical Center

Bill Hazle, Stargazers, LLC

Ken Schaecher, Select Health

#### **Members Absent:**

Tom Donovan, Department of Insurance

William Ganz, Idaho Board of Medicine

Paul McPherson, St. Luke's Children's Hospital

Rhonda Robinson Beale, Blue Cross of Idaho

Molly Steckel, Idaho Medical Association

Tiffany Whitmore Seibert, St. Alphonsus Health System

#### **DHW Staff Present:**

Carla Cerchione, Project Manager, Staff to the Telehealth Council Cynthia York, Administrator, Staff to the Telehealth Council Denise Chuckovich, Department of Health and Welfare, Deputy Director

### Guests:

Nicole McKay, Office of the Attorney General

Lynsey Winters Juel, Jannus

Sara Bartles, Business Psychology Associates

Joseph McCollum, Hawley Troxell Attorneys and Counselors

Mitch Toryanski, Bureau of Occupational Licenses

### 1. Welcome and Introductions - Stacey Carson, Telehealth Council Chair

Stacey Carson welcomed everyone.

## 2. Approve Minutes - Stacey Carson, Telehealth Council Chair

Minutes of the 2/13/15 meeting were moved and accepted as prepared.

## 3. Idaho Telehealth Access Act Status Update (HB 189) - Stacey Carson, Telehealth Council Chair

- Originally the Idaho Telehealth Access Act was introduced as HB 98. All of the amendments accepted by the Council at February 13th meeting were included in the bill and it became HB 189. There is great support and enthusiasm from the legislators on the topic of telehealth. The Idaho Telehealth Access Act has passed the House. It was heard in the Senate H&W committee on Monday and was voted to send to the floor with a DO PASS recommendation. It is on the Senate calendar for a third reading.
- Senate calendar
- ❖ Video and Audio Streaming live coverage of committee hearings
- Stacey Carson expressed gratitude for those individuals that testified is support on HB 189 in either the House or the Senate (or both), including:
  - Dr. Paul McPherson, St. Luke's Children's Hospital (Council Appointee)
  - Dr. Po Wong, Idaho Emergency Physicians
  - Dr. Adam Husney, St Alphonsus Health System
  - Molly Steckel, IMA (Council Appointee)
  - Ken McClure, Givens Pursley (representing IMA)
  - Nancy Kerr, Idaho Board of Medicine (Council Appointee)
  - Tim Olsen, Pinnacle Business Group (representing Tela-doc)
  - Steve Rector, Pinnacle Business Group (representing Tela-doc)
- ❖ Representative Rusche is pleased with the Council's work. The Senate H&W committee acknowledged how telemedicine is relevant in other efforts such as the SHIP and TSE. Representative Rusche has expressed to Stacey Carson his wish for the Council to continue its work and is hopeful the Council will address reimbursement issues.
- Tana Corey thanked Stacey Carson for meeting with many of the Boards represented by the Bureau of Occupational Licenses.

## 4. Payer Perspectives – Panel Discussion

- ❖ Telehealth plays a vital role as Idaho strives to improve quality and the patient experience, population health, and the affordability of healthcare. The appropriate use of telehealth technologies offers healthcare providers, hospitals, and health plans ways to provide improved access to healthcare at lower costs. This Council's charter is to develop standards, policies, rules and procedures for the use of telehealth in Idaho − and this could include work towards policies that foster reimbursement for telehealth services. While some of the barriers in regards to use of telemedicine technologies have decreased with the Idaho Telehealth Access Act − there are more barriers to address, one of which is the fact that without adequate reimbursement, these technologies will be under-utilized.
- ❖ Matt Wimmer, Department of Health and Welfare Division of Medicaid
  - Historically Medicaid looked to Medicare to formalize policy. HB 189 is great step forward. The
    Division of Medicaid fully supports the bill. Medicaid will not get in front of the boards but will wait for
    the boards to create rules. Most of the regulations were not written with telehealth in mind. HB 189
    has put the appropriate guard rails in place and Medicaid is very open to telehealth.
- Dr. Ken Schaecher, Select Health
  - Dr. Schaecher's comments are from a commercial payer perspective. The philosophy surrounding telehealth has evolved from even three years ago within the plan. Previously people were advocating that these services were not the same and shouldn't be paid the same. They now recognize the value that telehealth can bring especially in rural areas of Idaho and Utah. Payers are interested in paying for services that benefit patients and control the cost of healthcare. The provision of telehealth is cost effective. Current payment system depends on provider billing with a modifier. There is a reluctance to open it up too broadly, payers are concerned about abuse. Payers need to know the rules of the road. This bill defines the rules and guardrails. The future for telemedicine is bright.
- Linda Mac Vicar, Pacific Source
  - Telehealth Services
  - Medicare Learning Network, <u>Telehealth Services Fact Sheet</u>
  - Telehealth is a delivery system. The challenge with telehealth is that technology is changing so rapidly. Security and safety of the patients must be a priority. Reimbursement will follow the need.

- . Becky diVittorio, OptumHealth
  - United Healthcare and Optum are committed to innovation and helping people live healthier lives. They are focusing on innovation that fits within the rules of the road. Optum offers NOW Clinics which are virtual clinics supporting brick and mortar physicians. These virtual clinics offer patients real-time access to convenient medical care, information and resources from doctors and nurses. Moving forward in Idaho, if the originating site can be the patient's home, this will allow for NOW visits to take place. The market should determine the fee. United Healthcare and Optum are leveraging technology and telehealth expansion to gain efficiencies. The challenge will be how to ensure we are operating within the rules of the road. Optum will look to the boards for further rules as the demand for telehealth increases. Ultimately we are trying to meet the needs of our members within the rules and guidelines.
- Melissa Christian, Regence BlueShield
  - As a company, Regence is looking at rolling out a telehealth benefit for self-funded and the commercial lines in Washington, Oregon and Utah only. HB 189 will help move telehealth forward in Idaho but as of today, Regence is not committed to telehealth in Idaho. Regence will contract with Teladoc and MDLIVE to offer telehealth services. Self-funded employers will drive the market. Options may include: option of accessing a local doctor first, Teladoc or MDLIVE option available only after hours, limiting benefit to 1 or 2 visits per year. Melissa is a huge advocate of telehealth and continues to drive telehealth within Regence. Telehealth does not necessarily require a capital investment. Melissa's advice is to keep telehealth simple, make it easy for the patient.
- ❖ Dr. Rhonda Robinson Beale, Blue Cross of Idaho was invited but Dr. Beale was unable to attend.
- 5. Overview of Medical Licensure Compact (HB 150) Nancy Kerr, Idaho State Board of Medicine
  - ❖ The intent of this bill is to expand access, facilitate multi-state practice and support telemedicine efforts.
  - ❖ HB 150
  - ❖ Interstate Medical License Compact presentation
- SHIP / IHC Update and Idaho Telehealth Council Future Denise Chuckovich, IDHW
  - ❖ Idaho SHIP presentation
  - ❖ The SHIP would like a group with expertise in the use of telehealth and telehealth equipment to offer advice and act as a resource for the Idaho Healthcare Coalition. It is up to the Council to decide if this need can be met by the current Council, a smaller group of the Council or another group entirely. Deputy Director Chuckovich asked the Council for input regarding the future direction of the Council and congratulated the members on their excellent work in meeting the obligations set forth in HCR46.
  - Stacey Carson suggested the Council use the next meeting to discuss the future the Council.

With no further business to come before the Council, Chairman Carson adjourned the meeting at 12:30 p.m. without objection.